

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/749,482
		Filing Date	December 31, 2003
		First Named Inventor	Jeffrey S. Cohen
		Art Unit	Not yet assigned
		Examiner Name	Not yet assigned
Total Number of Pages in This Submission	5	Attorney Docket Number	42P17669

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input checked="" type="checkbox"/> PTO/SB/08		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

First Class Certificate of Mailing and the stamped return postcard and copies of the eleven (5) cited articles.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	MAY 5, 2004

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Krista Mathieson
Signature	
Date	5/5/04

Based on PTO/SB/21 (02-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 02/10/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



FEE TRANSMITTAL for FY 2004

Effective 01/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\\$)**

Complete If Known	
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Attorney Docket No.	42P17669

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1001	2001	385	Utility filing fee
1002	2002	170	Design filing fee
1003	2003	265	Plant filing fee
1004	2004	385	Reissue filing fee
1005	2005	80	Provisional filing fee
SUBTOTAL (1)		(\\$)	

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			- 20*	= <input type="text"/>	X <input type="text"/> = <input type="text"/>
			3	= <input type="text"/>	X <input type="text"/> = <input type="text"/>

Large Entity

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1202	2202	9
1201	2201	43
1203	2203	145
1204	2204	43
1205	2205	9
SUBTOTAL (2)		(\\$)

**or number previously paid, if greater, For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1051	2051	65	Surcharge - late filing fee or oath
1052	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	2053	130	Non-English specification
1812	1812	2,520	For filing a request for ex parte reexamination
1804	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1805	1,840*	Requesting publication of SIR after Examiner action
1251	2251	110	Extension for reply within first month
1252	2252	420	Extension for reply within second month
1253	2253	950	Extension for reply within third month
1254	2254	1,480	Extension for reply within fourth month
1255	2255	2,010	Extension for reply within fifth month
1404	2401	330	Notice of Appeal
1402	2402	330	Filing a brief in support of an appeal
1403	2403	290	Request for oral hearing
1451	2451	1,510	Petition to institute a public use proceeding
1452	2452	110	Petition to revive - unavoidable
1453	2453	1,330	Petition to revive - unintentional
1501	2501	1,330	Utility issue fee (or reissue)
1502	2502	480	Design issue fee
1503	2503	640	Plant issue fee
1460	2460	130	Petitions to the Commissioner
1807	1807	50	Processing fee under 37 CFR 1.17(q)
1806	1806	180	Submission of Information Disclosure Stmt
8021	8021	40	Recording each patent assignment per property (times number of properties)
1809	1809	770	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	2810	770	For each additional invention to be examined (37 CFR § 1.129(b))
1801	2801	770	Request for Continued Examination (RCE)
1802	1802	900	Request for expedited examination of a design application
Other fee (specify)		(\\$)	

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\\$)**

Complete (if applicable)

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature	<i>Brent E. Vecchia</i>			Date	May 5, 2004

Based on PTO/SB/17 (10-03) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 02/10/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Docket No.: 42P17669

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

JEFFREY S. COHEN

Application No.: 10/749,482

Filed: December 31, 2003

For: **TRELLIS DECODER AND METHOD OF
DECODING**

Art Group: Not yet assigned

Examiner: Not yet assigned

INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed for applications filed after June 30, 2003). This IDS and IDS Citation Form are being submitted before the mailing of a first Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

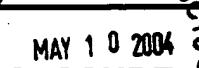
Date: May 5, 2004

Brent E. Vecchia
Brent E. Vecchia, Reg. No. 48,011

12400 Wilshire Boulevard, 7th Floor
Los Angeles, CA 90025
Telephone: (303) 740-1980

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Krista Mathieson 5/5/04
Krista Mathieson Date

Substitute for form 1449A/PTO			
 INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>			
Complete if Known			
Application Number		10/749,482	
Filing Date		December 31, 2003	
First Named Inventor		Jeffrey S. Cohen	
Art Unit		Not yet assigned	
Examiner Name		Not yet assigned	
Attorney Docket Number		42P17669	
Sheet	1	of	2

Examiner Signature		Date Considered	
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*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

Based on PTO/SB/08A (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 08/11/2003.

Send To: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

<p>Substitute for form 1449A/PTO</p> <h1 style="text-align: center;">INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h1>				<i>Complete If Known</i>	
Sheet	2	of	2	Application Number	10/749,482
				Filing Date	December 31, 2003
				First Named Inventor	Jeffrey S. Cohen
				Art Unit	Not yet assigned
				Examiner Name	Not yet assigned
				Attorney Docket Number	42P17669

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

***Applicant's unique citation designation number. *Applicant is to place a check mark here if English language Translation is attached.**

Based on PTO/SB/08B (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wir) 08/11/2003.
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